

Subject to form 1-4BAP10

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Use as many sheets as necessary

Sheet 1 of 2

Complete if known

Application Number: Divisional of 091946,579  
Filing Date: December 10, 2003  
First Named Inventor: Apostolepoulos  
Group An Unit: 3634  
Examiner Name:  
Attorney Docket Number:

## U.S. PATENT DOCUMENTS

Serial No.	U.S. Patent Document Number and Class (if known)	Name of Person or Applicant of Cited Document	Date of Publication of Cited Document MM-00-YYYY	Page, Column, Line, Where Assertion, Privilege or Retention, Figure, Appendix
1	6,299,935	Sturais	08/1899	
2	3,550,723	Gentry et al	12/1970	
3	3,603,423	Hansen	09/1971	
4	4,660,680	Patin	04/1987	
5	4,854,419	Lyres et al	08/1989	
6	5,299,655	Margaritis	04/1994	
7	2,675,201	Fried	04/1954	
8	5,730,248	Apostolepoulos	03/1998	
9	5,921,346	Apostolepoulos	07/1999	
10	6,003,634	Apostolepoulos	12/1999	
11	6,135,740	Apostolepoulos	10/2000	
12	6,138,793	Apostolepoulos	10/2000	
13	2,198,960	Deck	04/1940	
14	6,227,331	Apostolepoulos	05/2001	
15	4,071,191	Hutton	01/1978	
16	3,765,365	Gillespie	10/1973	
17	4,284,488	Brittain et al	08/1981	

## FOREIGN PATENT DOCUMENTS

Serial No.	Foreign Patent Document Office Number and Class (if known)	Name of Person or Applicant of Cited Document	Date of Publication of Cited Document MM-00-YYYY	Page, Column, Line, Where Assertion, Privilege or Retention, Figure, Appendix
10	FR 2,596,441	Vanacker	02/1987	

Examiner Signature

*[Signature]*

Date

Considered

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SUBTITLE to Form 1449-BPTO

**Complete If Known**

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Sheet

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of

2

Application Number

Divisional of 09/946,579

Filing Date

December 10, 2003

**First Name**

Apostolopoulos

Group Art Unit

$$\begin{array}{r} 3634 \end{array}$$

**Examiner Name**

Attorney Docket Number

## OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS

Examiner/  
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AB Sen

**Date**

**Considered**

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\*EXAMINER: Initial reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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